

# SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE

## IDENTIFICATION PAGE

IDENTIFICATION	
GHANA	
[NAME OF ORGANIZATION]	
TYPE OF PLACE OF RESIDENCE: URBAN	1                      2                       __
NAME OF DISTRICT/    REGION	
NAME OF LOCATION:	
LOCALITY: .....	
ENUMERATION AREA (EA) NUMBER	_ _ _ _ _ _ _
HOUSEHOLD NUMBER	_ _ _ _
LINE NUMBER OF RESPONDENT IN HOUSEHOLD SCHEDULE	_ _ _

INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE				DAY             _ _  MONTH         _ _  YEAR     _ _ _ _
INTERVIEWER'S NAME				INT. NUMBER  _ _ _ _
RESULT*				RESULT         _
NEXT VISIT DATE  TIME				TOTAL NUMBER OF VISITS =  _
<b>*RESULT CODES</b> <div style="display: flex; justify-content: space-between;"> <div> 1 COMPLETED  2 NOT AT HOME  3 POSTPONED  7 OTHER </div> <div> 4 REFUSED  5 PARTLY COMPLETED    <i>(specify)</i> </div> </div>				
SUPERVISOR				
NAME    _____  _ _ _				

## SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE

## SECTION I: RESPONDENT'S CHARACTERISTICS

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NO.	QUESTION	CODING CATEGORIES	SKIP TO
101.	How old are you (completed years)?	AGE IN COMPLETED YEARS       __ __	
102.	Have you ever attended formal school?	YES      1 NO      2	Q104
103.	What is the highest level of education that you attained? JSS Junior secondary school JHS Junior high school SSS Senior secondary school SHS Senior high school	PRIMARY      1 MIDDLE/JSS/JHS      2 SECONDARY/SSS/SHS      3 HIGHER      4	
104.	What is your religion?	CATHOLIC      1 ANGLICAN      2 METHODIST      3 PRESBYTERIAN      4 PENTECOSTAL/CHARISMATIC      5 OTHER CHRISTIAN      6 ISLAM      7 TRADITIONAL/SPIRITUALIST      8 NO RELIGION      9	
105.	What is your current marital status?	NEVER MARRIED      0 MARRIED      1 LIVING WITH SOMEONE AS IF MARRIED      2 DIVORCED      3 SEPARATED      4 WIDOWED      5	
106.	Have you ever given birth?	YES      1 NO      2	Q111
107.	How many live births have you ever had?	NUMBER OF LIVE BIRTHS       __ __  IF NONE      00	
108.	Among these live births, how many are still alive?	NUMBER CURRENTLY ALIVE       __ __  IF NONE, WRITE      00	
109.	Now, I would like to ask you about more recent births. How many live births have you had in the past five years?	NUMBER OF LIVE BIRTHS       __ __  NONE      00	
110.	Have you had a live birth in the last two years?	YES      1 NO      2	
111.	Are you pregnant now?	YES      1 NO      2 DON'T KNOW      9	

## SECTION II: USE, PURCHASING, REPURPOSING AND DISPOSAL OF NETS

NET USE INSIDE AND OUTSIDE THE HOUSE	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
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67	68
69	70
71	72
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77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

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NO.	QUESTION	CODING CATEGORIES	SKIP TO
201.	On average, how many nights in a week do you sleep under a mosquito net?	EVERY NIGHT 1 3 – 6 NIGHTS A WEEK 2 1 – 2 NIGHTS A WEEK 3 RARELY/NEVER 4	
202.	Approximately at what time did you go to sleep yesterday?  <b>ROUND TO THE NEAREST HOUR</b>	TIME IN HOURS: ____ HH OTHER (SPECIFY) 8888 DON'T KNOW 9999	
203.	Approximately at what time did you wake up today?  <b>ROUND TO THE NEAREST HOUR</b>	TIME IN HOUR: ____ HH OTHER (SPECIFY) 8888 DON'T KNOW 9999	
204.	Did you sleep indoors or outdoors?	ONLY INDOORS 1 ONLY OUTDOORS 2 PARTLY BOTH 3	<input type="checkbox"/> Q207
205.	What time did you go indoors for the evening? <b>ROUND TO THE NEAREST HOUR</b>	TIME IN HOUR: ____ HH OTHER (SPECIFY) 8888 DON'T KNOW 9999	
206.	What time did you go outdoors in the morning? <b>ROUND TO THE NEAREST HOUR</b>	TIME IN HOUR: ____ HH OTHER (SPECIFY) 8888 DON'T KNOW 9999	
207.	In the past two weeks, have you spent any nights away from your home for any reason? In the fields or traveling, for example?	YES 1 NO 2 DON'T KNOW 99	<input type="checkbox"/> Q211 <input type="checkbox"/> Q211
208.	How many nights have you spent away from your home during the last two weeks?	RECORD NIGHTS  __   __  DON'T KNOW 99	
209.	On the nights that you were away from home, did you sleep indoors, outdoors, or both indoors and outdoors?	INDOORS 1 OUTDOORS 2 BOTH INDOORS AND OUTDOORS 3	
210.	Did you sleep under a mosquito net during the nights that you were away from home?  If yes, ASK: "EVERY NIGHT, MOST NIGHTS OF THE TRIP, OR ONLY SOME/A FEW NIGHTS"?	YES, EVERY NIGHT OF THE TRIP 1 MOST NIGHTS OF THE TRIP 2 ONLY SOME/A FEW NIGHTS 3 NO NIGHTS .....4 DON'T KNOW 9	
211.	During which (if any) months of the year do you generally sleep outside (on a porch, roof, or courtyard or elsewhere outside the house)?  <b>MULTIPLE RESPONSES POSSIBLE. RECORD ALL RESPONSES MENTIONED</b>  <b>PROBE ONCE:</b> Anything else?	JANUARY A FEBRUARY B MARCH C APRIL D MAY E JUNE F JULY G AUGUST H SEPTEMBER I OCTOBER J NOVEMBER K DECEMBER L EVERY MONTH M	

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		NO MONTHS DON'T KNOW	N X	Q213
212.	How often do you use ITNs when sleeping outside?	EVERY NIGHT MOST OF THE NIGHTS ONLY SOMETIMES (RARELY) NEVER DON'T KNOW	1 2 3 4 99	

### Net purchasing and replacement

ITN: PURCHASING NETS AND NET REPLACEMENT				
NO.	QUESTION	CODING CATEGORIES		SKIP TO
213.	Do you know of a place in your community where you could purchase a mosquito net?	YES NO	1 2	
213B.	How long do you typically use your mosquito nets before replacing them?	# OF MONTHS DON'T KNOW	 88	
214.	When you receive new free nets from mass campaign or elsewhere, do you prefer to keep using your old nets, or do you start using the new net immediately?	PREFER TO KEEP USING OLD NETS UNTIL THEY ARE WORN OUT PREFER TO START USING NEW NETS IMMEDIATELY OTHER _____ (SPECIFY) DON'T KNOW	1 2 8  9	
214a	Are you willing to buy a net if they are not available for free?	YES NO	1 2	

### Net repurposing and disposal

ITN REPURPOSING AND DISPOSAL				
NO.	QUESTION	CODING CATEGORIES		SKIP TO
215.	The last time you had a net that was not useful for sleeping under, what did you do with it?  <b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?	REUSED FOR OTHER PURPOSE BURIED IT GARBAGE OR REFUSE DUMP BURNED IT OTHER (specify) DON'T KNOW NOT APPLICABLE (DID NOT HAVE NET)	A B C D 8 Y Z	Q218
216.	What was the mosquito net/netting material used for?  <b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?	FISHING DRYING FISH COVERING/PROTECTION SEEDLINGS/CROPS CURTAINS/SCREENS FOR WINDOWS/DOORS/EAVES /CEILING CLOTHING BEDDING/PADDING PATCH FOR OTHER NETS FENCING ROPE/TYING THINGS	A B C D E F G H I	

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		PROTECT DOMESTICATED ANIMALS J NETS USED IN FOOD PROCESSING (DRAIN COCOA, PALM OIL, ETC) K  OTHER X <i>(specify)</i> DON'T KNOW Z	
217.	What was the main reason you used the net for another purpose?	TOO MANY HOLES 1 TOO DIRTY 2 WORN OUT 3 NO ONE USING IT ANYMORE 4 NEEDED IT MORE FOR OTHER USES THAN SLEEPING 5 HAVE TOO MANY NETS/MORE THAN NEEDED 6 OTHER <i>(specify)</i> 88	

**Net care**

ITN- CARE AND PREFERENCE			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
218.	What do you do at home to prevent nets from tearing or getting holes? ?  <b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?	KEEP AWAY FROM CHILDREN A KEEP AWAY FROM PESTS B ROLL UP OR TIE UP WHEN NOT IN USE C HANDLE NETS WITH CARE D DO NOT SOIL WITH FOOD E KEEP AWAY FROM FLAME OR FIRE F WASH GENTLY G WASH WITH MAKABO/BAR SOAP H WASH ONLY WHEN DIRTY I INSPECT NETS REGULARLY FOR HOLES J REPAIR SMALL HOLES QUICKLY K DO NOTHING L DON'T HAVE ANY MOSQUITO NETS M OTHER <i>(specify)</i> X DON'T KNOW Z	

**SECTION III: USE OF HEALTH SERVICES**

ANC/IPTp: ACCESS AND USE			
301.	CHECK Q110 HAS HAD AT LEAST ONE CHILD IN LAST TWO YEARS	DID NOT HAVE A CHILD IN LAST TWO YEARS	Q319
302.	Now I would like to ask you some questions about the time that you were pregnant with your youngest child.  When you were pregnant with your youngest child, did you see anyone for a checkup (antenatal care) for this pregnancy?	YES 1 NO 2 DON'T KNOW 9	Q303 Q311

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302B	<p>For what reason(s) did you <b>NOT</b> go for a checkup during your pregnancy?</p> <p><b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b></p> <p><b>PROBE ONCE:</b> Anyone else?</p>	<p>DIDN'T HAVE TIME A</p> <p>HEALTH FACILITY TOO FAR B</p> <p>NO MONEY FOR TRANSPORT TO FACILITY C</p> <p>NO MONEY FOR ANC D</p> <p>DIDN'T THINK IT WAS NECESSARY E</p> <p>SPOUSE DID NOT GIVE PERMISSION G</p> <p>OTHER FAMILY MEMBER DID NOT GIVE PERMISSION H</p> <p>NO ONE TO ACCOMPANY HER I</p> <p>WAS NOT FEELING SICK K</p> <p>WAS NOT HER FIRST PREGNANCY L</p> <p>COVID-19 PANDEMIC M</p> <p>OTHER X</p> <p align="center">(SPECIFY)</p> <p>DON'T KNOW Z</p>	<p align="center">311</p>
303.	<p>Whom did you see?</p> <p><b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b></p> <p><b>PROBE ONCE:</b> Anyone else?</p>	<p>HEALTH PERSONEL</p> <p>DOCTOR A</p> <p>NURSE/MIDWIFE B</p> <p>COMMUNITY HEALTH AGENT C</p> <p>OTHER HEALTH PERSONEL D</p> <p align="center">(SPECIFY)</p> <p>TRADITIONAL BIRTH ATTENDANT E</p> <p>OTHER X</p> <p align="center">(SPECIFY)</p> <p>DON'T KNOW Z</p>	
304.	<p>Where did you <u>mainly</u> go for antenatal care during this pregnancy?</p>	<p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL 11</p> <p>GOVT. HEALTH CENTER 12</p> <p>GOVT. HEALTH POST/CHPS.....13</p> <p>OTHER PUBLIC FACILITY _____ 14</p> <p align="center">(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>FAITH-BASED, CHURCH, MISSION HOSPITAL/CLINIC21</p> <p>PRIVATE HOSPITAL/CLINIC22</p> <p>NURSING/MATERNITY HOME23</p> <p>TRADITIONAL BIRTH ATTENDANT 24</p> <p>TRADITIONAL HEALER/HERBALIST25</p> <p>PHARMACY26</p> <p>STREET DRUG VENDO</p> <p>27</p> <p>OTHER PRIVATE MEDICAL SECTOR</p> <p>_____</p> <p>28</p> <p align="center">(SPECIFY)</p> <p>OTHER SOURCE</p> <p>COMMUNITY HEALTH AGENT 31</p> <p>WORKSITE CLINIC32</p> <p>MOBILE CLINIC 33</p> <p>CHURCH/MOSQUE34</p>	

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		Home.....3 5 OTHER _____ 88 (SPECIFY)	
305.	How many prenatal consultations/checkups did you have for this pregnancy?	NUMBER OF PRENATAL VISITS  __ __  DON'T KNOW 99	
306.	During which month of your pregnancy did you first go for a prenatal visit?	MONTH OF PREGNANCY  __  DON'T KNOW 99	IF >2, ->Q307, ELSE-> 308
307.	For what reason(s) did you not go earlier in your pregnancy?  <b>MULTIPLE RESPONSES POSSIBLE CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anyone else?	DIDN'T HAVE TIME A HEALTH FACILITY TOO FAR B NO MONEY FOR TRANSPORT TO FACILITY C NO MONEY FOR ANC D DIDN'T KNOW SHE WAS PREGNANT E DIDN'T WANT OTHERS TO KNOW SHE WAS PREGNANT F SPOUSE DID NOT GIVE PERMISSION G OTHER FAMILY MEMBER DID NOT GIVE PERMISSION H NO ONE TO ACCOMPANY HER I SPOUSE WENT IN HER PLACE J WAS NOT FEELING SICK K WAS NOT HER5 FIRST PREGNANCY L COVID-19 PANDEMIC M OTHER X (SPECIFY) DON'T KNOW Z	
308.	During this pregnancy, did your husband/partner accompany you to the health facility for antenatal care at any time?	YES 1 NO 2	
309.	Did you receive a mosquito net at a prenatal visit for this pregnancy?	YES 1 NO 2 DON'T KNOW 9	Q311 Q311
310.	During which month(s) of your pregnancy did you first receive a bed net?	MONTH OF PREGNANCY  __  DON'T KNOW 99	
311.	During this pregnancy, did you take SP/Fansidar (3 pills)** to <u>keep you from getting</u> malaria?  **Adjust this question to match the local SP products, then delete this note  <b>EMPHASIZE 'KEEP YOU FROM GETTING". DO NOT CIRCLE 1 IF SHE WAS ONLY GIVEN DRUGS BECAUSE SHE HAD MALARIA.</b>	YES 1 NO 2 DON'T KNOW 9	Q311A Q312 Q317
312.	Why did you <u>not</u> take any medicine to prevent you from getting malaria?  <b>MULTIPLE RESPONSES POSSIBLE CIRCLE ALL RESPONSES</b>	NONE AVAILABLE AT HEALTH FACILITY A PROVIDER DID NOT OFFER MEDICINE B PROVIDER REFUSED TO GIVE MEDICINE C MEDICINE WAS NOT FREE D NO WATER AT FACILITY TO TAKE WITH MEDICINE E	

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	<b>PROBE ONCE:</b> Anything else?	NO CUP AT FACILITY TO DRINK WATER AFRAID OF EFFECTS ON MY HEALTH AFRAID OF EFFECTS ON FETUS HEALTH DID NOT GO FOR PRENATAL CONSULTATION COVID-19 PANDEMIC OTHER (SPECIFY) DON'T KNOW	F G H I J X Z	Q317
313.	How many times did you take the medication SP/Fansidar (3 pills)** to prevent malaria during this pregnancy?  **Adjust this question to match the local SP products, then delete this note	NUMBER OF TIMES DON'T KNOW	_ _  99	
314.	Where did you get this medicine? ['medicine' is Referring to SP for IPTp from the prior question]  <b>ASK ABOUT EACH SOURCE OF THE MEDICINE WITH THE QUESTIONS BELOW</b>			
314A.	During any prenatal care Visit at a public health facility?	YES NO	1 0	
314B.	During any prenatal care visit at a private health facility?	YES NO	1 0	
314C.	During another visit to a health facility?	YES NO	1 0	
314D.	In a pharmacy?	YES NO	1 0	
314E.	In the market/store?	YES NO	1 0	
314F.	Another place?	YES NO	1 0	
314G.	Other Place _____ (specify)			
<b>CHECK IF EITHER 314A OR 314B ARE 1 AND PROCEED TO Q315 AND Q316. IF BOTH 314A AND 314B ARE 0, SKIP TO Q317</b>				
315.	<b>IF MEDICINE OBTAINED DURING ANTENATAL VISIT OR ANOTHER FACILITY VISIT, ASK:</b> Did you pay for the medicine to keep you from getting malaria?  <b>NOTE THAT THIS QUESTION IS ABOUT PAYMENT FOR THE ACTUAL SP /Fansidar or Novidar SP (3 pills) TO PREVENT MALARIA AND NOT FOR AN ANC CARD OR OTHER MEDICAL FEES</b>	YES NO DON'T KNOW	1 2 9	Q317 Q317
316.	How much did you pay for SP/Fansidar (the three pills)** to keep you from getting malaria?	COST in Local Currency DON'T KNOW	_ _   _ _ _  9999	



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	**Adjust this question to match the local SP products, then delete this note		
	<b>Q317 and Q318 are FOR ALL WOMEN</b>		
317.	Do you intend to have any more children?	YES 1 NO 2 DON'T KNOW 9	
317B.	If you become pregnant during the next two years, how many times do you think you would go to the health facility for antenatal care?	NUMBER OF TIMES  __ __  DON'T KNOW 99	If 0 or 99, skip to 318
317C.	At what month in your pregnancy would you intend to go for your first antenatal visit?	MONTH OF PREGNANCY  __  DON'T KNOW 99	
318.	If you become pregnant during the next two years, do you think you would take SP/Fansidar (3 tablets)** to keep you from getting malaria?  **Adjust this question to match the local SP products, then delete this note	YES 1 NO 2 DON'T KNOW 9	
<b>MALARIA CASE MANAGEMENT</b>			
319.	Now I would like to ask you some questions about the children that are less than five years old who live in this household and who are either your own children or the children for whom you are the primary caretaker.  How many of your own children or children for whom you are the primary caretaker are less than five years old?	NUMBER OF THEIR CHILDREN/CHILDREN FOR WHOM THEY ARE RESPONSIBLE <5 YEARS  __  NONE 00	Q340
320.	Have any of these children been sick with fever in the past two weeks?  <b>NOTE THAT THIS QUESTION CONCERNS THE CHILDREN OF THE WOMAN OR THOSE FOR WHOM SHE IS PRIMARILY RESPONSIBLE AND WHO LIVE IN THE HOUSEHOLD.</b>	YES 1 NO 2 DON'T KNOW 9	Q340 Q340
321.	How many of these children have been sick with fever in this household in the last two weeks?  <b>NOTE THAT THIS QUESTION CONCERNS THE CHILDREN OF THE WOMAN OR THOSE FOR WHOM SHE IS PRIMARILY RESPONSIBLE AND WHO LIVE IN THE HOUSEHOLD.</b>	NUMBER OF UNDER-5 CHILDREN SICK WITH FEVER IN LAST TWO WEEKS  __  DON'T KNOW 99	
322.	Of those children who have had fever in the last two weeks, what is the name of the child who has had the fever most recently?  <b>NOTE THAT THIS QUESTION CONCERNS THE CHILDREN OF THE WOMAN OR THOSE FOR</b>	CHILD'S NAME : _____	

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	WHOM SHE IS PRIMARILY RESPONSIBLE AND WHO LIVE IN THE HOUSEHOLD.		
323.	How old is “CHILD’S NAME”?  RECORD THE AGE OF THE CHILD USING ONLY ONE UNIT: WEEKS, MONTHS OR YEARS. PLEASE DO NOT MIX THE UNITS. FOR EXAMPLE, IF THE WOMAN SAYS ONE AND A HALF YEARS, CONVERT TO MONTHS AND RECORD 18 MONTHS	AGE OF CHILD:  IN WEEKS                   __ __   IN MONTHS                 __ __   IN YEARS                   __ __	
324.	When "CHILD'S NAME" had the fever most recently, did you seek any advice or treatment for the illness?	YES                                      1 NO                                         2	Q325 Q324B
324B.	Why did you not seek any advice or treatment	DIDN'T HAVE TIME                      A HEALTH FACILITY TOO FAR              B NO MONEY FOR TRANSPORT TO FACILITY C <del>NO MONEY FOR ANC</del> D DIDN'T KNOW WHERE TO SEEK CARE E DIDN'T WANT OTHERS TO KNOW F SPOUSE DID NOT GIVE PERMISSION G OTHER FAMILY MEMBER DID NOT GIVE PERMISSION H NO ONE TO ACCOMPANY I SPOUSE/SOMEONE ELSE WENT IN HER PLACE J THE CHILD WAS NOT FEELING SICK K COVID-19 PANDEMIC L OTHER X  (SPECIFY)	} Q340
325.	How long after the fever started did you seek treatment for “CHILD’S NAME”?	SAME DAY                                  1 NEXT DAY                                   2 TWO OR MORE DAYS AFTER FEVER      3 DON'T KNOW                               8	
326.	From where did you seek advice or treatment?  MULTIPLE RESPONSES POSSIBLE CIRCLE ALL RESPONSES  PROBE ONCE: Anywhere else?	PUBLIC SECTOR GOVERNMENT HOSPITAL                      A GOVT. HEALTH CENTER                      B GOVT. HEALTH POST/CHPS.....C MOBILE CLINIC.....D FIELD WORKER/CHW.....E  OTHER PUBLIC FACILITY _____F  (SPECIFY)  PRIVATE MEDICAL SECTOR FAITH-BASED, CHURCH, MISSION HOSPITAL/CLINIC  G PRIVATE HOSPITAL/CLINIC  H NURSING/MATERNITY HOME                      I	

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		TRADITIONAL HEALER J PHARMACY  K CHEMIST/DRUG STORE.....L FPG/PPAG CLINIC.....M PRIVATE DOCTOR.....N STREET DRUG VENDOR OTHER PRIVATE SOURCE _____ P (SPECIFY) OTHER SOURCE COMMUNITY HEALTH WORKER Q WORKSITE CLINIC R MOBILE CLINIC S CHURCH/MOSQUE  T ITINERANT DRUG SELLER.....U OTHER _____  X (SPECIFY)	
327.	Which of the places you mentioned above did you go to <u>first</u> to seek advice or treatment?	PUBLIC SECTOR GOVERNMENT HOSPITAL A GOVT. HEALTH CENTER B OTHER PUBLIC FACILITY _____ C (SPECIFY)  PRIVATE MEDICAL SECTOR FAITH-BASED, CHURCH, MISSION HOSPITAL/CLINIC D PRIVATE HOSPITAL/CLINIC E NURSING/MATERNITY HOME F TRADITIONAL HEALER/HERBALIST  G PHARMACY  H STREET DRUG VENDOR I OTHER PRIVATE SOURCE _____ J (SPECIFY) OTHER SOURCE COMMUNITY HEALTH AGENT/WORKER K WORKSITE CLINIC L MOBILE CLINIC  M CHURCH/MOSQUE  N	

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		OTHER _____  O  (SPECIFY)	
328.	At any time during the illness, did you ask that your child be given an injection to treat malaria?	YES 1 NO 2 DON'T KNOW 9	
329.	At any time during the sickness, did your child have a drop of blood taken from his/her finger, heel or elsewhere to do a test?	YES 1 NO 2 DON'T KNOW 9	Q331 Q331
330.	What was the result of the blood test – was the fever caused by malaria or was the fever not caused by malaria?	FEVER CAUSED BY MALARIA 1 FEVER NOT CAUSED BY MALARIA 2 DON'T KNOW/NOT TOLD 9	
331.	At any time during this sickness, did "CHILD'S NAME" take any medicine?	YES 1 NO 2 DON'T KNOW 9	Q340 Q340
332.	Were the drugs that "CHILD's NAME" took tablets or injection?	TABLET ONLY 1 INJECTION ONLY 2 TABLET AND INJECTION 3	
333.	What medicine did he or she take?  <b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?  <b>IF THE RESPONDENT DOES NOT REMEMBER THE NAME OF THE MEDICINE GIVEN TO THE CHILD, SHOW HER THE PICTURES** OF THE LOCALLY AVAILABLE ACT, THEN ASK:</b>  Do any of the medicines on these pictures look like the medicine that your child took? If yes, show me which ones?  **This question requires obtaining images of the packaging of the ACTs available in the country	SP/FANSIDAR/MALOXINE A CHLOROQUINE/NIVAQUINE B QUININE/ATEQUININE PILLS C INJECTION/IV.....D ACT (Coartem, Lumarterm, Artefan, Lonart, Gen-m Artemos plus, P-alaxin, Duo-cotexcin, Artesunate amodiaquine winthrop, Camoquine plus, G sunate Co-arsucam) F ARTESUNATE RECTAL.....G AMODIAQUINE.....H OTHER INJECTION I ARTESUNATE (NOT INJECTED).....J ASPIRIN K DOLIPRANE/PARACETOMOL L IBUPROFEN M HERBAL MEDICINE.....N OTHER X (SPECIFY) DON'T KNOW Z	
334.	<b>CHECK Q329: ACT GIVEN</b>	CODE D CIRCLED 1 CODE D NOT CIRCLED 2	Q340
335.	From where did you receive the ACT?	PUBLIC SECTOR GOVERNMENT HOSPITAL A GOVT. HEALTH CENTER B GOVT. HEALTH POST/CHPS.....C OTHER PUBLIC FACILITY _____ D (SPECIFY)	

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		PRIVATE MEDICAL SECTOR FAITH-BASED, CHURCH, MISSION HOSPITAL/CLINIC    E PRIVATE HOSPITAL/CLINIC    F NURSING/MATERNITY HOME  G TRADITIONAL HEALER  H PHARMACY    I CHEMIST/DRUG STORE.....J FPG/PPAG CLINIC.....K PRIVATE DOCTOR.....L STREET MEDICINE VENDOR  M OTHER PRIVATE SOURCE _____  N (SPECIFY) OTHER SOURCE COMMUNITY HEALTH WORKER/AGENT    O WORKSITE CLINIC    P MOBILE CLINIC  Q CHURCH/MOSQUE  R OTHER _____  X (SPECIFY)	
336.	How much did the ACT medication cost?  <b>NOTE THAT THIS QUESTION IS ABOUT PAYMENT FOR THE ACTUAL MEDICATION TO TREAT MALARIA AND NOT FOR A HEALTH CARD, CONSULTATION, OR OTHER MEDICAL FEES</b>	COST IN Local Currency..... _ _ _   _ _ _  FREE.....0000 DK/NOT SURE    9999	
337.	How long after the fever started did he or she first take the ACT?	SAME DAY    1 NEXT DAY    2 TWO OR MORE DAYS AFTER FEVER    3 DON'T KNOW    9	
338.	Did he or she finish all the ACT medication that was given?	YES    1 NO    2 THE CHILD STILL TAKING THE MEDICATION.....3	Q340  Q340
339.	Why did he or she not finish the ACT medication that was given? <b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b>	HE/SHE STARTED TO FEEL BETTER BEFORE THE END OF THE TREATMENT    A WANTED TO SAVE SOME OF THE MEDICATION FOR THE NEXT TIME    B DID NOT LIKE THE TASTE    C	

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	<b>PROBE ONCE:</b> Anything else?	KEPT VOMITTING IT D THE DRUGS HAD UNPLEASANT SIDE EFFECTS E OTHER (SPECIFY) _____ X DON'T KNOW/REMEMBER Z				
340.	<i>In the past six months, to what extent has the COVID-19 pandemic in [ENTER COUNTRY] affected your ability to do the following?</i>  Read out all options	NOT AT ALL	TO SOME EXTENT	TO A GREAT EXTENT	DON'T KNOW/REMEMBER	
340A.	Use ITNs every night	1	2	3	9	
340B.	Go to the health facility for services when you need them	1	2	3	9	
340C.	Obtain a malaria test for you or someone in your household within 24 hours of onset of fever	1	2	3	9	
340D.	Get prompt treatment for malaria for you or someone in your household	1	2	3	9	
340E.	[Ask ONLY if currently pregnant]** Attend antenatal care **Note: add appropriate check for pregnancy when tablet is programmed	1	2	3	9	If not currently pregnant, do not ask and skip to 340G
340F.	[Ask ONLY if currently pregnant]** Get the medicine to prevent malaria in pregnancy **Note: add appropriate check for pregnancy when tablet is programmed	1	2	3	9	
340G.	Pay for malaria related health services	1	2	3	9	
340H.	Pay for transportation to get health services	1	2	3	9	

**SECTION IV: SEASONAL MALARIA CHEMOPREVENTION**

SEASONAL MALARIA CHEMOPREVENTION			
[PLEASE ADAPT THE QUESTIONS IN THIS SECTION TO REFLECT THE COUNTRY POLICY ON SMC]			
N°	QUESTION	CODING CATEGORIES	SKIP TO
401	Have you heard of a medicine given to healthy children under 5 years old to prevent malaria during the rainy season?  <b>EMPHASIZE "PREVENTING" NOT TREATING MALARIA</b>	YES..... 1 NO ..... 2	➔ 501
402	During this rainy season, has this medication been distributed to households in your community?	YES..... 1 NO ..... 2 DON'T KNOW..... 9	
402a			
403	<b>CHECK Q315-3: THE WOMAN HAS CHILDREN UNDER 5</b>	AT LEAST ONE CHILD <5 YEARS IN HER CARE ..... 1	

# **SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE**

	<b>YEARS OLD IN HER CARE</b>	NO CHILDREN <5 YEARS IN HER CARE..... 2	→ 501
<b>HOUSEHOLD DISTRIBUTION THIS RAINY SEASON</b>			
404	Have distributors come to your household during this rainy season to distribute medication for health children to prevent malaria?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 9	→ 429 → 429
405	When did a distributor last visit your household this rainy season to distribute the medication that prevents malaria in children under 5 years old? <b>EMPHASIZE LAST VISIT – ONLY ONE RESPONSE ALLOWED</b>	JULY ..... 1 AUGUST ..... 2 SEPTEMBER ..... 3 OCTOBER ..... 4 OTHER (SPECIFY) ..... 8 DON'T KNOW ..... 9	
406	Were you present when a distributor visited your household in [MONTH OF LAST VISIT] to distribute the medication that prevents malaria in children?	YES ..... 1 NO ..... 2	→ 412
407	INTENTIONALLY LEFT BLANK		
408	INTENTIONALLY LEFT BLANK		
409	INTENTIONALLY LEFT BLANK		
410	Did the distributor explain to you the benefits to your child taking the medication?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 9	
410a	Do the distributor explain that the SMC medicine is given only in the distribution of SMC to the rainy season?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 9	
411	Did the distributor inform you about any side effects that this medication can cause in children?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 9	
412	I want to ask you a few questions about the last time the distributors visited to give the medication that prevents malaria for your child <b>during this rainy season</b> .  What is the name of the youngest child under the age of 5 years in this household for whom you are responsible?	NAME.....	
413	How old is "CHILD'S NAME"?  <b>RECORD THE AGE IN MONTHS. Q414-422 WILL REFER SPECIFICALLY TO THIS CHILD.</b> <b>*IF CHILD IS LESS THAN 3 MONTHS ASK FOR THE NEXT OLDEST CHILD UNDER 5 YEARS</b>	AGE IN MONTHS .....	
414	On the first day of the distribution, did the distributor <b>observe</b> [CHILD'S NAME] taking a dose of the medication that prevents malaria, or did they leave the medication with you?	OBSERVED THE CHILD TAKING A DOSE OF THE MEDICATION ..... 1 LEFT THE MEDICATION ..... 2 NEITHER ..... 3 DON'T KNOW ..... 9	→ 418 → 418 → 418
416	Did the child take the <b>first</b> dose of medication that the distributors left?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 9	→ 418 → 418
417	What is the reason(s) the child did not receive the first dose of medication from the distributors?	FORGOT TO GIVE THE MEDICINE TO THE CHILD ..... B LOST THE FIRST DOSE DISTRIBUTOR LEFT ..... C NO WATER TO TAKE MEDICATION ..... E NO FOOD TO TAKE MEDICATION ..... F	
	<b>MULTIPLE RESPONSES POSSIBLE</b>		

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	<p><b>MARK ALL RESPONSES THE RESPONDENT SAYS</b></p> <p><b>PROBE ONCE:</b> Anything else?</p>	<p>CHILD VOMITED TABLETS AFTER SWALLOWING THEM ..... G</p> <p>DIFFICULTY CRUSHING THE TABLETS ..... H</p> <p>CHILD FELL SICK AFTER TAKING A PREVIOUS DOSE OF THIS MEDICATION ..... I</p> <p>HEARD OF OR SAW BAD SECONDARY EFFECTS IN OTHER CHILDREN ..... J</p> <p>MEDICATION DOES NOT PREVENT MALARIA ..... K</p> <p>CHILD WAS NOT SICK ..... L</p> <p>DID NOT KNOW ENOUGH ABOUT THE MEDICATION ..... M</p> <p>DON'T TRUST PEOPLE WHO DISTRIBUTED THE MEDICATION ..... N</p> <p>PREFERRED TO SAVE THE MEDICATION FOR FUTURE ILLNESS ..... P</p> <p>DON'T TRUST PEOPLE WHO DISTRIBUTED OR ADMINISTERED THE MEDICATION ..... O</p> <p>CHOSE TO GIVE THE MEDICATION TO OTHER CHILDREN AT HOME ..... Q</p> <p>OTHER ..... X</p> <p align="center">(SPECIFY)</p> <p>DON'T KNOW ..... Z</p>	
417B	<b>VERIFY REGION OF RESIDENCE</b>	<p>SMC ADMINISTRATION IS DOT ON FIRST DAY ONLY ..... 1</p> <p>SMC ADMINISTRATION IS DOT ON ALL THREE DAYS ..... 2</p>	→ Q420
418	<p>After the first dose, for how many <b>additional days</b> did [CHILD'S NAME] take the other doses of the medication that the distributor <b>left with the caregiver</b>?</p> <p><b>*ADAPT TO COUNTRY SMC IMPLEMENTATION POLICY IF ALL DOSES ARE GIVEN BY DOT OR NOT.</b></p>	<p>DIDN'T TAKE ANY MEDICATION AFTER THEIR VISIT ..... 0</p> <p>1 DAY AFTER ..... 1</p> <p>2 DAYS AFTER ..... 2</p> <p>3 DAYS AFTER ..... 3</p> <p>DK ..... 9</p>	<p>→ 426</p> <p>→ 426</p> <p>→ 426</p>
419	<p>Why didn't [CHILD'S NAME] take all the other doses of the medication?</p> <p><b>MULTIPLE RESPONSES POSSIBLE</b></p> <p><b>INDICATE ALL RESPONSES</b></p> <p><b>PROBE ONCE:</b> Anything else?</p>	<p>CHILD NOT AT THE HOUSE ..... A</p> <p>FORGOT TO GIVE THE MEDICINE TO THE CHILD ..... B</p> <p>LOST THE MEDICATION DOSES ..... C</p> <p>CHILD TOOK ALL THE OTHER DOSES IN ONE DAY ..... D</p> <p>NO WATER TO TAKE THE MEDICATION ..... E</p> <p>NO FOOD TO TAKE THE MEDICATION ..... F</p> <p>DID NOT HAVE TIME ..... G</p> <p>CHILD VOMITED UP THE PILLS AFTER SWALLOWING THEM ..... H</p> <p>DIFFICULTY CRUSHING THE TABLETS ..... I</p> <p>CHILD FELL SICK AFTER TAKING THE FIRST DOSE ..... J</p> <p>HEARD OR SAW BAD SECONDARY EFFECTS IN OTHER CHILDREN ..... K</p> <p>MEDICATION DOES NOT PREVENT MALARIA ..... L</p> <p>CHILD WAS NOT SICK ..... M</p> <p>DID NOT KNOW ENOUGH ABOUT THE MEDICATION ..... N</p> <p>DON'T TRUST PEOPLE WHO DISTRIBUTED OR ADMINISTERED THE MEDICATION ..... O</p> <p>PREFERRED TO SAVE THE MEDICATION FOR FUTURE ILLNESS ..... P</p> <p>CHOSE TO GIVE THE MEDICATION TO OTHER CHILDREN AT HOME ..... Q</p> <p>OTHER(SPECIFY) ..... X</p> <p>DON'T KNOW ..... Z</p>	426
420	On the <b>second</b> day of the distribution, did the distributor <b>observe</b> [CHILD'S NAME] taking a dose of the medication that prevents malaria, or did they leave the medication with you?	<p>OBSERVED THE CHILD TAKING A DOSE OF THE MEDICATION ..... 1</p> <p>LEFT THE MEDICATION ..... 2</p> <p>NEITHER ..... 3</p> <p>DON'T KNOW ..... 9</p>	<p>→ 423</p> <p>→ 423</p> <p>→ 423</p>
421	Did the child take the <b>second</b> dose of medication that the distributors left?	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DON'T KNOW ..... 9</p>	<p>→ 423</p> <p>→ 423</p>
422	What is the reason(s) the child did not receive the <b>second</b> dose of medication from the distributors?	<p>FORGOT TO GIVE THE MEDICINE TO THE CHILD ..... B</p> <p>LOST THE FIRST DOSE DISTRIBUTOR LEFT ..... C</p> <p>NO WATER TO TAKE MEDICATION ..... E</p> <p>NO FOOD TO TAKE MEDICATION ..... F</p>	



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	<p><b>MULTIPLE RESPONSES POSSIBLE</b> <b>MARK ALL RESPONSES THE RESPONDENT SAYS</b></p> <p><b>PROBE ONCE:</b> Anything else?</p>	<p>CHILD VOMITED TABLETS AFTER SWALLOWING THEM ..... G</p> <p>DIFFICULTY CRUSHING THE TABLETS ..... H</p> <p>CHILD FELL SICK AFTER TAKING A PREVIOUS DOSE OF THIS MEDICATION ..... I</p> <p>HEARD OF OR SAW BAD SECONDARY EFFECTS IN OTHER CHILDREN ..... J</p> <p>MEDICATION DOES NOT PREVENT MALARIA ..... K</p> <p>CHILD WAS NOT SICK ..... L</p> <p>DID NOT KNOW ENOUGH ABOUT THE MEDICATION ..... M</p> <p>DON'T TRUST PEOPLE WHO DISTRIBUTED THE MEDICATION ..... N</p> <p>PREFERRED TO SAVE THE MEDICATION FOR FUTURE ILLNESS ..... P</p> <p>DON'T TRUST PEOPLE WHO DISTRIBUTED OR ADMINISTERED THE MEDICATION ..... O</p> <p>CHOSE TO GIVE THE MEDICATION TO OTHER CHILDREN AT HOME ..... Q</p> <p>OTHER ..... X</p> <p align="center">(SPECIFY)</p> <p>DON'T KNOW ..... Z</p>	
423	On the <u>third</u> day of the distribution, did the distributor <b>observe</b> [CHILD'S NAME] taking a dose of the medication that prevents malaria, or did they leave the medication with you?	<p>OBSERVED THE CHILD TAKING A DOSE OF THE MEDICATION ..... 1</p> <p>LEFT THE MEDICATION ..... 2</p> <p>NEITHER ..... 3</p> <p>DON'T KNOW ..... 9</p>	<p>→ 426</p> <p>→ 426</p> <p>→ 426</p>
424	Did the child take the <u>third</u> dose of the medication that the distributors left?	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DON'T KNOW ..... 9</p>	<p>→ 426</p> <p>→ 426</p>
425	<p>What is the reason(s) the child did not receive the third dose of medication from the distributors?</p> <p><b>MULTIPLE RESPONSES POSSIBLE</b> <b>MARK ALL RESPONSES THE RESPONDENT SAYS</b></p> <p><b>PROBE ONCE:</b> Anything else?</p>	<p>FORGOT TO GIVE THE MEDICINE TO THE CHILD ..... B</p> <p>LOST THE FIRST DOSE DISTRIBUTOR LEFT ..... C</p> <p>NO WATER TO TAKE MEDICATION ..... E</p> <p>NO FOOD TO TAKE MEDICATION ..... F</p> <p>CHILD VOMITED TABLETS AFTER SWALLOWING THEM ..... G</p> <p>DIFFICULTY CRUSHING THE TABLETS ..... H</p> <p>CHILD FELL SICK AFTER TAKING A PREVIOUS DOSE OF THIS MEDICATION ..... I</p> <p>HEARD OF OR SAW BAD SECONDARY EFFECTS IN OTHER CHILDREN ..... J</p> <p>MEDICATION DOES NOT PREVENT MALARIA ..... K</p> <p>CHILD WAS NOT SICK ..... L</p> <p>DID NOT KNOW ENOUGH ABOUT THE MEDICATION ..... M</p> <p>DON'T TRUST PEOPLE WHO DISTRIBUTED THE MEDICATION ..... N</p> <p>PREFERRED TO SAVE THE MEDICATION FOR FUTURE ILLNESS ..... P</p> <p>DON'T TRUST PEOPLE WHO DISTRIBUTED OR ADMINISTERED THE MEDICATION ..... O</p> <p>CHOSE TO GIVE THE MEDICATION TO OTHER CHILDREN AT HOME ..... Q</p> <p>OTHER ..... X</p> <p align="center">(SPECIFY)</p> <p>DON'T KNOW ..... Z</p>	
426	Did the medication have any side effects in this child?	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DON'T KNOW ..... 9</p>	<p>→ 429</p> <p>→ 429</p>
427	<p>If yes, which ones?</p> <p><b>MULTIPLE RESPONSES POSSIBLE</b> <b>INDICATE ALL RESPONSES</b></p> <p><b>PROBE ONCE:</b> Anything else?</p>	<p>VOMITING ..... A</p> <p>FEVER ..... B</p> <p>SKIN RASH ..... C</p> <p>DIARRHEA ..... D</p> <p>STOMACHACHE ..... E</p> <p>LETHARGY/FATIGUE ..... F</p> <p>LOSS OF APPETITE ..... G</p> <p>HEADACHE ..... H</p> <p>OTHER ..... X</p>	

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		(SPECIFY)	
		DON'T KNOW..... Z	
428	What did you do when this child had these side effects?  <b>MULTIPLE RESPONSES POSSIBLE</b> <b>INDICATE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?	SOUGHT ADVICE OR TREATMENT FROM A HEALTH PROVIDER ..... A SOUGHT ADVICE OR TREATMENT SOMEWHERE ELSE ..... B GAVE CHILD OTHER MEDICATIONS ..... C TOOK CARE OF CHILD AT HOME ..... D WAITED FOR CHILD TO GET BETTER ..... E OTHER (SPECIFY) ..... X DON'T KNOW..... Z	

**INTENTION FOR FUTURE PARTICIPATION**

429	Are you planning to have your children take the medicine to prevent malaria during the next rainy season?	YES ..... 1 NO ..... 2 NO CHILD WILL BE UNDER FIVE YEARS OLD NEXT RAINY SEASON ..... 3 DON'T KNOW..... 9	
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**SECTION V: IDEATION – GENERAL PERCEPTIONS ABOUT MALARIA**

**General malaria knowledge**

GENERAL MALARIA: KNOWLEDGE			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
501.	What signs or symptoms would lead you to think that a person has malaria?  <b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?	FEVER ..... A CHILLS ..... B HEADACHE ..... C JOINT PAIN ..... D BODY PAIN ..... E POOR APPETITE ..... F NOT ABLE TO EAT ..... G TIREDNESS ..... H BITTER TASTE IN THE MOUTH ..... I SEIZURE/CONVULSIONS ..... K GOES UNCONCIOUS ..... L DIZZINESS ..... M DEATH ..... N MOUTH SORES ..... O OTHER ..... X (SPECIFY) DON'T KNOW ..... Z	
502.	What causes malaria?  <b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b>	MOSQUITO BITES ..... A EATING DIRTY FOOD ..... B EATING UNRIPE FRUIT ..... C BEING MALNOURISHED ..... D NOT HAVING A HEALTHY DIET ..... E	

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	<b>PROBE ONCE:</b> Anything else?	DRINKING DIRTY WATER G DIRTY SURROUNDINGS H DRINKING BEER I GETTING SOAKED WITH RAIN J COLD OR CHANGING WEATHER K WITCHCRAFT L TEETHING M INDIGESTION N SUN O EATING OIL P HEAVY WORK Q OTHER ( <i>specify</i> ) X DON'T KNOW Z	
503.	What are the things that people can do to stop them from getting malaria?  <b>MULTIPLE RESPONSES POSSIBLE CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?	SLEEP UNDER A MOSQUITO NET A SLEEP UNDER AN INSECTICIDE-TREATED MOSQUITO NET B USE MOSQUITO REPELLANT (LOTION, SPRAY) C AVOID MOSQUITO BITES D TAKE PREVENTIVE MEDICATION E SPRAY HOUSE WITH INSECTICIDE F USE MOSQUITO COILS (LIKE MOONTIGER) AGAINST MOSQUITOES G CUT THE GRASS AROUND THE HOUSE H DRY OUT PUDDLES/STAGNANT WATER I KEEP HOUSE SURROUNDINGS CLEAN J BURN LEAVES K DON'T DRINK DIRTY WATER L DON'T EAT BAD FOOD (IMMATURE FRUITS/LEFTOVER FOOD) M PUT SCREENS ON THE WINDOWS N TRADITIONAL MEDECINE O AVOID THE SUN P AVOID CONSUMING OIL Q OTHER ( <i>specify</i> ) X DON'T KNOW Y	
504.	What medicines can be used to effectively treat malaria?  <b>MULTIPLE RESPONSES POSSIBLE CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?  <b>SHOW HER THE PICTURES OF THE LOCALLY AVAILABLE ACT, THEN ASK:</b>  Do any of the medications on these photos look like the medicine used to effectively treat malaria?	SP/FANSIDAR/MALOXINE/AMALAR A CHLOROQUINE/NIVAQUINE B QUININE/ATEQUININE C PILLS INJECTION/IV.....D ACT (Coartem, Lumarterm, Artefan, Lonart Gen-m, Artemos plus, P-alaxin, Duo-cotexcin, Artesunate amodiaquine winthrop, Camoquine plus, G sunate, Co-arsucam ) E ARTESUNATE INJECTION F ARTESUNATE RECTAL.....G AMODIAQUINE.....H OTHER INJECTION I ARTESUNATE (NOT INJECTED).....J ASPIRIN K DOLIPRANE/PARACETOMOL L IBUPROFEN M	

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	HERBAL/TRADITIONAL MEDICINE	N	
	OTHER	X	
	(SPECIFY)		
	DON'T KNOW	Z	

### Interpersonal communication about malaria

MALARIA IN GENERAL : INTERPERSONAL COMMUNICATION			
N .	QUESTION	CODING CATEGORIES	SKIP TO
505.	In the last six months, did you talk about malaria with your spouse or partner?	YES NO	1 2
506.	In the last six months, did you talk about malaria with your friends or relations?	YES NO	1 2

### Perceived threat of malaria

GENERAL MALARIA IDEATION: PERCEIVED THREAT				
I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with the statement. <i>Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.</i>				
		AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
<b>PERCEIVED SUSCEPTIBILITY</b>				
507.	People in this community only get malaria during rainy season	1	2	9
508.	Nearly every year, someone in this community gets a serious case of malaria	1	2	9
509.	When your child has a fever, you always worry that it might be malaria	1	2	9
510.	During the rainy season, you worry almost every day that someone in your family will get malaria	1	2	9
<b>PERCEIVED SEVERITY</b>				
511.	You do not worry about malaria because it can be easily treated	1	2	9
512.	Only weak children can die from malaria	1	2	9
513.	Every case of malaria can potentially lead to death	1	2	9
514.	When someone you know gets malaria, you usually expect them to completely recover in a few days	1	2	9

### SECTION VI: IDEATION - INSECTICIDE TREATED NETS (ITNs)

#### Attitudes

BED NETS: COLOR PREFERENCES			
601.	Which color of mosquito nets do you prefer?	WHITE	1
		BLUE	2
		GREEN	3
		PINK	4
		BLACK	5
		OTHER COLOR	8
		(SPECIFY)	
		COLOR DOES NOT MATTER TO ME	10

## Perceived response efficacy

21

## SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE

### Perceived self-efficacy

ITN- PERCEIVED SELF EFFICACY				
I am going to ask you about a series of actions you could take and I would like you to tell me if you think you could or could not do each action successfully. <i>Interviewer: Do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.</i>				
NO.	QUESTION	COULD	COULD NOT	DON'T KNOW/ UNCERTAIN
616.	Sleep under a mosquito net for the entire night when there are lots of mosquitoes	1	2	9
617.	Sleep under a mosquito net for the entire night when there are few mosquitoes	1	2	9
618.	Sleep under a mosquito net every night of the year	1	2	9
619.	Get all of your children to sleep under a mosquito net every night of the year	1	2	9

### Perceived Norm

ITN- PERCEIVED NORM			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
620.	Generally, among the people in your community who have nets, how many sleep under them every night? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	ALL PEOPLE AT LEAST HALF OF THE PEOPLE FEWER THAN HALF OF THE PEOPLE DON'T KNOW	1 2 3 9
621.	Generally, among all the people in your community, how many people would call you names if they know that you sleep under a net every night? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	ALL PEOPLE AT LEAST HALF OF THE PEOPLE FEWER THAN HALF OF THE PEOPLE DON'T KNOW	1 2 3 9

## SECTION VII: INTERMITTENT PREVENTIVE TREATMENT IN PREGNANCY (IPTp)

### Knowledge

ANC/IPTp: KNOWLEDGE			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
701.	When should a pregnant woman go for pregnancy care for the first time?	AS SOON AS SHE KNOWS SHE IS PREGNANT WHEN THE BABY STARTS TO MOVE IN THE FIRST TRIMESTER START OF 4 <sup>TH</sup> MONTH OR 2 <sup>ND</sup> TRIMESTER ANY TIME DURING PREGNANCY OTHER ( <i>specify</i> ) DON'T KNOW	1 2 3 4 5 8 9
702.	How many times should a woman go for a prenatal visit during one pregnancy?	NUMBER OF TIMES _____ DON'T KNOW	_____ 99
703.	How many times during her pregnancy should a woman receive medicine to keep her from getting malaria?	NUMBER OF TIMES DON'T KNOW	__ __  99

### Perceived threat of malaria in pregnancy

I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with the statement.
--

### SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE

Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.				
NO.	QUESTION	AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
704.	When a pregnant woman gets malaria, the effect on her and her unborn child is very serious.	1	2	9
705.	Pregnant women are more likely to get malaria compared to women who are not pregnant.	1	2	9

### Attitudes towards ANC/IPTp

ANC/IPTp: ATTITUDES				
I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with the statement. Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.				
NO.	QUESTION	AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
706.	It is okay for pregnant women to take the medicine to prevent malaria on empty stomach	1	2	9
707.	Even if a woman thinks she may be pregnant, she should wait a few months before she sees a health provider	1	2	9
708.	A woman who has given birth before does not need to see a health provider as soon as she thinks she might be pregnant.	1	2	9
709.	The medications given to pregnant women to prevent them from getting malaria are safe for them and their babies	1	2	9
710.	A pregnant woman must take several doses of the medicine to prevent malaria during pregnancy	1	2	9

### Perceived response efficacy

ANC/IPTp: RESPONSE EFFICACY				
I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with the statement. Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.				
NO.	QUESTION	AGRE E	DISAGRE E	DON'T KNOW/ UNCERTAIN
711.	Consulting health facility providers during pregnancy is a way to make sure the baby and mother are healthy	1	2	9
712.	The medicine given to pregnant women to keep them from getting sick from malaria works well to keep the mother healthy	1	2	9
713.	Pregnant women should still take the medicine that is meant to keep them from getting sick from malaria even if they sleep under nets every night	1	2	9

### Perceived self-efficacy

ANC/IPTp: PERCEIVED SELF-EFFICACY				
I am going to ask you about a series of actions you could take, and I would like you to tell me if you think you could or could not do each action successfully. Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.				
NO.	QUESTION	COULD	NOT COULD	DON'T KNOW/ UNCERTAIN
714.	Go for antenatal care as soon as I think I might be pregnant	1	2	9

**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
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715.	Convince my spouse to accompany me spouse/partner to the health facility for antenatal care	1	2	9
716.	Go for at least four antenatal care appointments at the health facility	1	2	9
717.	Go for antenatal care even if my religious leader does not agree	1	2	9
718.	Take the medicine to prevent malaria at least three** times during pregnancy	1	2	9
719.	Request the medicine that helps to prevent malaria when I go for antenatal care	1	2	9

## Norms

ANC/IPTp: NORMS			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
720.	Generally, how many women in your community go to antenatal care at least four times when they are pregnant? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	ALL WOMEN AT LEAST HALF OF THE WOMEN FEWER THAN HALF OF THE WOMEN DON'T KNOW	1 2 3 9
721.	Generally, how many women in your community take medicine to <u>prevent</u> malaria when they are pregnant? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	ALL WOMEN AT LEAST HALF OF THE WOMEN FEWER THAN HALF OF THE WOMEN DON'T KNOW	1 2 3 9
721B.	Generally, among all the people in your community, how many people would call you names if they know that you take medicine to prevent malaria when you are pregnant? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	ALL PEOPLE AT LEAST HALF OF THE PEOPLE FEWER THAN HALF OF THE PEOPLE DON'T KNOW	1 2 3 9

## Decision-making

ANC/IPTp- DECISION-MAKING			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
CHECK Q105: CURRENT MARITAL STATUS		CODE 1 OR 2 CIRCLE CODE 1 OR 2 NOT CIRCLED	1 2 <b>Q801</b>
722.	In your household, who usually makes decisions about going for antenatal care at the health facility when you are pregnant – you, your spouse/partner, you and your spouse/partner, or someone else?	RESPONDENT SPOUSE/PARTNER JOINT DECISION WITH SPOUSE/PARTNER MOTHER MOTHER IN LAW SOMEONE ELSE DON'T MAKE THIS KIND OF DECISION DON'T KNOW	1 2 3 4 5 6 7 9



**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
STANDARD WOMEN'S QUESTIONNAIRE**

723.	Have you and your spouse/partner ever spoken about going to antenatal care?	YES NO DON'T KNOW	1 2 9	Q801 Q801
724.	When did you last discuss going to a antenatal consultation with your spouse/partner?	DURING THE LAST SIX MONTHS BETWEEN 7 AND 11 MONTHS AGO 1 – 2 YRS AGO MORE THAN 2 YRS AGO DON'T KNOW DID NOT DISCUSS GOING TO ANC	1 2 3 4 9 10	
725.	During this discussion, was there any disagreement between you and your spouse/partner about going to a antenatal consultation?	YES NO DON'T KNOW	1 2 9	
726.	During this discussion, did your spouse/partner ask you for your opinion about going to the antenatal consultation?	YES NO DON'T KNOW	1 2 9	
727.	During the discussion, did you share with your spouse/partner your opinion about going to the antenatal consultation?	YES NO DON'T KNOW	1 2 9	Q729 Q729
728.	Do you think that your spouse/partner appreciated the opinion you shared during the discussion?	YES NO DON'T KNOW	1 2 9	
729.	In that discussion, who had the final word on the decision made?  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW"</b>	RESPONDENT SPOUSE/PARTNER JOINT DECISION WITH SPOUSE/PARTNER MOTHER OF THE RESPONDENT MOTHER IN LAW OF THE RESPONDENT SOMEONE ELSE DON'T MAKE THIS KIND OF DECISION DON'T KNOW	1 2 3 4 5 6 7 9	

**SECTION VIII: IDEATION - CARE-SEEKING AND TREATMENT**

**Knowledge**

CARE-SEEKING AND TREATMENT: KNOWLEDGE			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
801.	How soon after a child develops fever should you take a child under five years old to get advice or treatment for the fever?  Should you do it as soon as the child's fever is detected, the same or next day as the child's fever begins, or two or more days after the fever begins?	SAME DAY AS FEVER'S ONSET THE DAY AFTER THE FEVER'S ONSET THE DAY AFTER THE DAY FOLLOWING THE FEVER'S ONSET 3 OTHER ( <i>specify</i> ) DON'T KNOW	1 2 3 8 9
802.	What is the <u>best</u> way to know if someone has malaria?	TAKE BLOOD FOR MALARIA TEST OTHER ( <i>specify</i> ) DON'T KNOW	1 8 9
803.	In your community, where is the <u>best</u> place to go if you think you have malaria?	PUBLIC SECTOR	

**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
STANDARD WOMEN'S QUESTIONNAIRE**

		HOSPITAL	1	
		1		
		HEALTH CENTER	1	
		2		
		OTHER PUBLIC FACILITY	1	
		3		
		(SPECIFY)		
		PRIVATE MEDICAL SECTOR		
		FAITH-BASED, CHURCH, MISSION HOSPITAL/CLINIC	21	
		PRIVATE HOSPITAL/CLINIC	2	
		2		
		NURSING/MATERNITY HOME	2	
		3		
		TRADITIONAL BIRTH ATTENDANT	2	
		4		
		TRADITIONAL HEALER/HERBALIST	2	
		5		
		PHARMACY	2	
		6		
		STREET MEDICINE	2	
		VENDOR	2	
		7		
		OTHER PRIVATE	2	
		8		
		(SPECIFY)		
		OTHER SOURCE		
		COMMUNITY HEALTH		
		WORKER	3	
		1		
		WORKSITE		
		CLINIC	3	
		2		
		MOBILE CLINIC	3	
		3		
		CHURCH/MOSQUE	3	
		4		
		OTHER	8	
		8		
		(SPECIFY)		
		DON'T		
		KNOW	9	
		9		

## SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE

### Care-seeking Attitudes

CARE-SEEKING AND TREATMENT ATTITUDES				
I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with the statement. <i>Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.</i>				
		AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
804.	The health provider is always the best person to talk to when you think your child may have malaria	1	2	9
805.	One does not need to continue taking all the medicine doses against malaria if the patient feels well after taking the initial doses <del>is already cured</del>	1	2	9
806.	A parent should ask for an injection from the health provider or community health worker if they think his/her child has malaria	1	2	9
807.	I prefer that my child receive the medicine to treat malaria by injection rather than swallow it	1	2	9
808.	A person should only take malaria medicine if a health provider says that his/her fever really is caused by malaria	1	2	9
809.	If a health provider says a person does not have malaria, the patient should ask for a malaria medication just in case s/he needs it	1	2	9
810.	When my child has a fever, it is better to start by giving him any malaria medicine I have at home.	1	2	9
811.	It is important to take all the anti malaria medicine prescribed to ensure a complete recovery	1	2	9
812.	When my child has a fever, I do not go directly to the health facility, I first go elsewhere to get him/her medicine	1	2	9

### Perceived response efficacy

CARE-SEEKING AND TREATMENT PERCEIVED RESPONSE EFFICACY				
I am going to read a series of statements to you and I would like you to tell whether you agree or disagree with each statement. <i>Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.</i>				
NO.	QUESTION	AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
813.	A blood test for malaria is the <u>only</u> way to know if someone really has malaria or not	1	2	9
814.	[purposely left empty]	1	2	9
815.	A person should still take malaria medicine even if the malaria test result says that the fever is not due to malaria	1	2	9
816.	Parents can diagnose malaria by a person's symptoms just as well as a blood test for malaria	1	2	9
817.	The malaria drugs obtained from the health facility are effective in treating malaria	1	2	9
818.	The malaria medicines that you buy in the market are as good as the ones distributed at the health facility	1	2	9

### Perceived self-efficacy

CARE-SEEKING AND TREATMENT SELF-EFFICACY				
I am going to ask you about a series of actions you could take, and I would like you to tell me if you think you could or could not do each action successfully. <i>Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.</i>				

**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
STANDARD WOMEN'S QUESTIONNAIRE**

NO.	QUESTION	COULD	COULD NOT	DON'T KNOW/ UNCERTAIN
819.	Find the money to take your child to the health facility at the first sign of malaria.	1	2	9
820.	Get permission from your husband or other family member to take your child to the health facility/health provider when your child has fever	1	2	9
821.	Take your child to the health facility the same day or next day s/he develops a fever	1	2	9
822.	Request a blood test at the health facility when you think your child might have malaria	1	2	9
823.	Make sure your child takes the full dose of medicine that s/he is prescribed for malaria	1	2	9
824.	Find the money to pay for the medication the health provider recommends to treat malaria	1	2	9

## Norms

CARE-SEEKING AND TREATMENT: NORMS			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
825.	Generally, how many people in your community take their children to a health provider on the same day or day after they develop a fever? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	ALL PEOPLE 1 AT LEAST HALF 2 FEWER THAN HALF 3 DON'T KNOW 9	
826.	Generally, how many children in your community with fever are taken to a health facility to get tested for malaria? Would you say...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	ALL CHILDREN 1 AT LEAST HALF 2 FEWER THAN HALF 3 DON'T KNOW 9	
827.	Generally, among all the people in your community, how many people would call you names if they know that you take your children to a health provider on the same day or day after they develop a fever? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	ALL PEOPLE 1 AT LEAST HALF OF THE PEOPLE 2 FEWER THAN HALF OF THE PEOPLE 3 DON'T KNOW 9	

## Decision-making

CARE-SEEKING AND TREATMENT: DECISION-MAKING			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
	<b>CHECK: CURRENT MARITAL STATUS at Q105</b>	CURRENTLY MARRIED/LIVING WITH SOMEONE 1 NOT CURRENTLY MARRIED 2	<input type="checkbox"/> Q901

**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
STANDARD WOMEN'S QUESTIONNAIRE**

828.	In your household, who usually makes decisions to go to the health facility when your child has malaria? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	RESPONDENT 1 SPOUSE/PARTNER OF RESPONDENT 2 JOINT DECISION WITH SPOUSE/PARTNER 3 MOTHER OF RESPONDENT 4 MOTHER IN LAW OF RESPONDENT 5 SOMEONE ELSE 6 DON'T MAKE THIS KIND OF DECISION 7 DON'T KNOW 9	
829.	In your household, who usually makes decisions to purchase medicine when your child is sick with fever? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	RESPONDENT 1 SPOUSE/PARTNER OF RESPONDENT 2 JOINT DECISION WITH SPOUSE/PARTNER 3 MOTHER OF RESPONDENT 4 MOTHER IN LAW OF RESPONDENT 5 SOMEONE ELSE 6 DON'T MAKE THIS KIND OF DECISION 7 DON'T KNOW 9	
830.	In your household, who usually makes decisions about what to do when you are sick? Would you say ...  <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	RESPONDENT 1 SPOUSE/PARTNER OF RESPONDENT 2 JOINT DECISION WITH SPOUSE/PARTNER 3 MOTHER OF RESPONDENT 4 MOTHER IN LAW OF RESPONDENT 5 SOMEONE ELSE 6 DON'T MAKE THIS KIND OF DECISION 7 DON'T KNOW 9	

## Intention

CARE-SEEKING AND TREATMENT: Intention			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
831.	Check caregiver status (AT LEAST ONE CHILD UNDER FIVE YEARS FOR WHOM RESPONDENT IS RESPONSIBLE)	YES 1 NO 2	<input type="checkbox"/> Q901
832.	Imagine that one of your children under five years has fever <u>today</u> , how soon after you notice the fever would you take the child to seek advice or treatment for your child?	TODAY 1 TOMORROW 2 THE DAY AFTER TOMORROW OR LATER 3 WILL NOT AT ALL SEEK ADVICE OR TREATMENT 4 DON'T KNOW 8	<input type="checkbox"/> Q901

**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
STANDARD WOMEN'S QUESTIONNAIRE**

833.	Where would you take the child <u>first</u> to seek advice or treatment?	PUBLIC SECTOR	
		GOVERNMENT HOSPITAL	11
		GOVT. HEALTH CENTER	12
		OTHER PUBLIC FACILITY _____	13
		(SPECIFY)	
		PRIVATE MEDICAL SECTOR	
		FAITH-BASED/MISSION HOSPITAL/CLINIC	21
		PRIVATE HOSPITAL/CLINIC	22
		NURSING/MATERNITY HOME	23
		PHARMACY	25
		STREET DRUG VENDOR	26
		OTHER PRIVATE MEDICAL SOURCE	
		_____	29
		(SPECIFY)	
		OTHER SOURCE	
		COMMUNITY HEALTH AGENT (CHW)	31
		WORKSITE CLINIC	32
		MOBILE CLINIC	33
		CHURCH/MOSQUE	34
		TRADITIONAL HEALER/HERBALIST	25
		OTHER _____	88
		(SPECIFY)	
		NONE OF THE ABOVE	99

**SECTION IX: IDEATION – SEASONAL MALARIA CHEMOPREVENTION**

**Knowledge of SMC**

SMC : KNOWLEDGE			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
902	For how many days per month should a child under 5 years old take the medicine to prevent malaria?	1 DAY .....1 2 DAYS.....2 3 DAYS.....3 4 DAYS OR MORE.....4 DON'T KNOW .....9	
902a	What are the common side effects of this medication in children?  <b>MULTIPLE RESPONSES POSSIBLE</b> <b>CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE:</b> Anything else?	VOMITING.....A FEVER.....B SKIN RASH .....C DIARRHEA .....D STOMACHACHE.....E LETHARGY/FATIGUE.....F LOSS OF APPETITE .....G HEADACHE .....H OTHER((SPECIFY).....X DON'T KNOW .....Z	

## SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE

903	<p>If a child vomits multiple times after taking the medicine, what should you do?</p> <p>MULTIPLE RESPONSES POSSIBLE INDICATE ALL RESPONSES</p> <p>PROBE ONCE: Anything else?</p>	<p>SEEK ADVICE OR TREATMENT FROM A HEALTH PROVIDER OR COMMUNITY HEALTH WORKER ..... A</p> <p>SEEK ADVICE OR TREATMENT SOMEWHERE ELSE ..... B</p> <p>GIVE CHILD OTHER MEDICATIONS..... C</p> <p>TAKE CARE OF CHILD AT HOME ..... D</p> <p>WAIT FOR CHILD TO GET BETTER ..... E</p> <p>OTHER ..... X</p> <p style="text-align: center;">(SPECIFY)</p> <p>DON'T KNOW ..... Z</p>	
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### SMC Attitudes

ATTITUDES RELATED TO SMC				
I am going to read a series of statements to you and I would like you to tell me whether you agree or disagree with each statement. <i>Interviewer: do not read 'DONT KNOW/NOT SURE' response and only use if respondent is not able to provide another answer.</i>				
		AGREE	DISAGREE	DON'T KNOW/ NOT SURE
904	Leaders in my community support the distribution of the medication that prevents malaria in children during the rainy season.	1	2	9
905	When children take SMC, sleeping under ITNs is no longer necessary to prevent malaria	1	2	9
906	Parents in my community feel they are obligated to accept the medication that prevents malaria in children during the rainy season that is offered by the community health workers.	1	2	9
907	Healthy children still need to take the medication to prevent malaria in children during the rainy season.	1	2	9
909	The medication given to prevent malaria during the rainy season can make a child sick.	1	2	9
910	The distributors of the medication that prevents malaria in children during the rainy season make parents pay for the medication.	1	2	9
910A	It is important to give my child all the doses of the medication that prevents malaria during the rainy season left by the distributors.	1	2	9

### Response efficacy

RESPONSE EFFICACY OF SMC				
I am going to read a series of statements to you and I would like you to tell whether you agree or disagree with each statement. <i>Interviewer: do not read 'DONT KNOW/NOT SURE' response and only use if respondent is not able to provide another answer.</i>				
N°	QUESTION	AGREE	DISAGREE	DON'T KNOW/ NOT SURE
912	The SMC medication does a good job in keeping children safe from malaria	1	2	9
913	The SMC medication will not work well if my child does not take all of the doses.	1	2	9

### Perceived self-efficacy

SELF-EFFICACY RELATED TO SMC				
I am going to ask you about a series of actions you could take, and I would like you to tell me if you think you could or could not do each action successfully. <i>Interviewer: do not read 'DON'T KNOW/NOT SURE' response and only use if respondent is not able to provide another answer.</i>				
N°	QUESTION	COULD	COULD NOT	DON'T KNOW/ NOT SURE
914	Give my child all the SMC pills left with me by the distributor.	1	2	9

## SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE

### Norms

SMC : NORMS			
N°	QUESTION	CODING CATEGORIES	SKIP TO
921	How many people, generally, in your community give to their children all doses of the medication left by the distributor? Would you say...  <b>READ THE OPTIONS OUT LOUD, BUT DO NOT READ "DON'T KNOW"</b>	EVERYONE ..... 1 AT LEAST HALF OF PEOPLE ..... 2 FEWER THAN HALF OF PEOPLE ..... 3 DON'T KNOW ..... 9	
921a	How many families, generally, in your community give the SMC medication to other children in the householder <u>older than 5 years</u> ?	EVERYONE ..... 1 AT LEAST HALF OF PEOPLE ..... 2 FEWER THAN HALF OF PEOPLE ..... 3 DON'T KNOW ..... 9	

### Decision-making

SMC : DECISION-MAKING			
N°	QUESTION	CODING CATEGORIES	SKIP TO
922	VERIFY Q105 : CURRENT MARITAL STATUS	CURRENTLY MARRIED/LIVING WITH SOMEONE ..... 1 NOT CURRENTLY MARRIED ..... 2	→ Q1001
923	In your household, who generally makes the decision to accept the preventive treatment for malaria for your children during the rainy season? Would you say...  <b>READ THE OPTIONS OUT LOUD, BUT DO NOT READ "DON'T KNOW"</b>	RESPONDENT ..... 1 SPOUSE/PARTNER OF RESPONDENT ..... 2 JOINT DECISION WITH SPOUSE/PARTNER ..... 3 MOTHER OF RESPONDENT ..... 4 MOTHER IN LAW OF RESPONDENT ..... 5 SOMEONE ELSE ..... 6 DON'T MAKE THIS KIND OF DECISION ..... 7 DON'T KNOW ..... 9 NO CHILDREN ..... 9	

### SECTION X: IDEATION – PERCEPTIONS OF PROVIDERS, COMMUNITY HEALTH WORKERS, AND HEALTH FACILITIES

PERCEPTIONS OF PROVIDERS, COMMUNITY HEALTH WORKERS, AND HEALTH FACILITIES				
I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with the statement. <b>Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.</b>				
No.		AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
<b>GENERAL PERCEPTIONS</b>				
1002	Health providers in health facilities in this community treat their patients with respect	1	2	9
<b>PERCEPTIONS RELATED TO MALARIA CASE MANAGEMENT</b>				
1004	Health facilities always have the medication to treat malaria.	1	2	9
1006	Health facilities in this community always have the Malaria test kit (mRDT or blood test kit to tell if a person has malaria.	1	2	9
1007		1	2	9



**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
STANDARD WOMEN'S QUESTIONNAIRE**

1008 .	Health providers at the health facilities in this community know about how to treat malaria in children	1	2	9
1010 .	Health providers at the health facility in your community make parents pay for the medication to treat malaria in children less than five years old.  <b>NOTE THAT THIS QUESTION IS ABOUT PAYMENT FOR THE ACTUAL MEDICINE NOT FOR THE HEALTH CARD OR OTHER RELATED FEES. INTERVIEWER SHOULD ENSURE THAT THE RESPONDENT CLEARLY UNDERSTANDS THIS QUESTION.</b>	1	2	9
1012 .	Health facility providers in your community make parents of children less than five years old pay for the blood test to see if the child has malaria.  <b>NOTE THAT THIS QUESTION IS ABOUT PAYMENT FOR THE ACTUAL TEST NOT FOR A HEALTH CARD OR OTHER RELATED FEES. INTERVIEWER SHOULD ENSURE THAT THIS IS CLEAR TO THE RESPONDENT</b>	1	2	9

**SECTION X: IDEATION – PERCEPTIONS OF PROVIDERS, COMMUNITY HEALTH WORKERS, AND HEALTH FACILITIES**

PERCEPTIONS RELATED TO SMC PROVIDERS AND HEALTH FACILITIES DURING SMC				
1014	During the distribution of the medication that prevents malaria in children in the rainy season, the staff are not available at the health facility.	1	2	9
1014A	During the distribution of SMC medicine, I prefer not to go to the health facility for any type of service.	1	2	9
1014B	The distributors of the medication that prevents malaria in children during the rainy season do not care about my community.	1	2	9
1014C	The distributors of the medication that prevents malaria in children during the rainy season are knowledgeable about the medication.	1	2	9
1014D	I felt comfortable asking questions to the distributors of the medication that prevents malaria in children during the rainy season if i needed more information.	1	2	9
1014E	The distributors of the medication that prevents malaria in children during the rainy season do not usually answer caregivers' questions about the medication in a respectful manner.	1	2	9
1014F	The distributors of the medication that prevents malaria in children during the rainy season treated me with respect during their visit.	1	2	9

**ANC/IPTp**

1015 .	In your community, providers at the health facility make pregnant women pay for SP/Fansidar or SP (3 pills), the medicine to prevent malaria.  <b>NOTE THAT THIS QUESTION IS ABOUT PAYMENT FOR THE ACTUAL MEDICINE NOT FOR THE ANC CARD OR OTHER ATTENDANT FEES. INTERVIEWER SHOULD ENSURE THAT THIS IS CLEAR TO THE RESPONDENT</b>	1	2	9
1016 .	Antenatal health providers in this community generally treat pregnant women with respect	1	2	9
1017 .	Health providers at the health facility in this community always offer the medicine to prevent malaria to pregnant women	1	2	9
1018 .	Health providers at the health facilities in this community always give pregnant women the medication to prevent malaria only if she's eaten beforehand.	1	2	9
1019 .	If a woman goes to the health facility during the first two months of her pregnancy, the health providers will send her away	1	2	9
1020 .	If a pregnant woman goes to the health facility without her husband/partner, the health providers will send her away.	1	2	9

## SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS STANDARD WOMEN'S QUESTIONNAIRE

### Gender Norms

Gender norms				
I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with the statement. <i>Interviewer: do not read 'DON'T KNOW/UNCERTAIN' response and only use it if the respondent is not able to provide another answer.</i>				
		AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
1021.	When there are not enough nets, it is more important that <u>female</u> children sleep under the available nets rather than <u>male</u> children.	1	2	9
1022.	When there are not enough nets, it is more important that <u>male</u> children sleep under the available nets rather than <u>female</u> children.	1	2	9
1023.	A pregnant woman should feel comfortable asking her husband/spouse to go to the health facility for a prenatal consultation.	1	2	9
1024.	When there is not enough money, it is more important that <u>male</u> children with fever get medicine rather than <u>female</u> children.	1	2	9
1025.	When there is not enough money, it is more important that <u>female</u> children with fever get medicine rather than <u>male</u> children.	1	2	9

### SECTION XI: RECALL OF MALARIA MESSAGES

GENERAL MALARIA: EXPOSURE TO MALARIA MESSAGES			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
1101.	How frequently do you listen to the radio? Would you say <b>READ OPTIONS ALOUD</b>	4 OR MORE TIMES A WEEK      1 2 -3 TIMES A WEEK            2 ONCE A WEEK                    3 LESS THAN ONCE A WEEK    4 NEVER LISTENS TO RADIO    5	Q1103
1102.	What time of day are you <u>most likely</u> to listen to the radio – <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	EARLY MORNING (4AM TO 8AM)      1 LATE MORNING (8AM TO 12 NOON)    2 AFTERNOON (12 NOON TO 4 PM)       3 EARLY EVENING (4PM TO 8PM)        4 LATE EVENING (8PM TO 12 MIDNIGHT) 5 NIGHT (12 MIDNIGHT TO 4AM)       6 DON'T KNOW                               8	
1103.	How frequently do you watch television? Would you say... <b>READ OPTIONS ALOUD</b>	4 OR MORE TIMES A WEEK      1 2 -3 TIMES A WEEK            2 ONCE A WEEK                    3 LESS THAN ONCE A WEEK    4 NEVER WATCHES TELEVISION   5	Q1105
1104.	What time of day are you <u>most likely</u> to watch television – <b>READ OPTIONS ALOUD BUT DO NOT READ "DON'T KNOW".</b>	EARLY MORNING (4AM TO 8AM)      1 LATE MORNING (8AM TO 12 NOON)    2 AFTERNOON (12 NOON TO 4 PM)       3 EARLY EVENING (4PM TO 8PM)        4 LATE EVENING (8PM TO 12 MIDNIGHT) 5 NIGHT (12 MIDNIGHT TO 4AM)       6 DON'T KNOW                               9	

**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
STANDARD WOMEN'S QUESTIONNAIRE**

1105.	Do you personally have a mobile device like a phone or tablet?	YES NO	1 2	Q1108
1106.	Do you share this mobile device with someone else?	YES NO	1 2	
1107.	On this mobile device, which of the following can you receive:  <b>ASK ABOUT EACH TYPE OF MEDIA SEPARTELY</b>	YES NO DK CHAT/TEXT/EMAIL 1 0.....9 PICTURES 1 0.....9 VIDEOS 1 0.....9 AUDIO FILES 1 0.....9 OTHER MEDIA _____ 1 0.....9 (SPECIFY)		
1108.	In the past 6 months, have you seen or heard any messages about malaria?	YES NO	1 2	Q1111
1109.	Where did you see or hear the messages or information?  <b>MULTIPLE RESPONSES POSSIBLE CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE: Anything else?</b>  <b>REVISE RESPONSES PER LOCAL CONTEXT</b>	HEALTH CENTER/HOSPITAL A COMMUNITY HEALTH WORKER B FRIENDS/FAMILY C WORKPLACE D COMMUNITY VOLUNTEER/CBA.....E HEALTH WORKER.....F DRAMA GROUPS G PEER EDUCATORS H POSTERS/BILLBOARDS I TELEVISION J RADIO K NEWSPAPER/MAGAZINE L LEAFLET/BROCHURE.....M WORD OF MOUTH.....N COMMUNITY EVENT/DURBAR MEETING/DRAMA GROUPS.....O MOSQUE/CHURCH P COMMUNITY LEADERS Q POLITICAL LEADERS.....R SMS/CHAT/EMAIL S SOCIAL MEDIA T OTHER (SPECIFY) X DON'T KNOW Z		
1110.	What messages about malaria did you hear or see?***  <b>MULTIPLE RESPONSES POSSIBLE CIRCLE ALL RESPONSES</b>  <b>PROBE ONCE: Anything else?</b>  ***Review response options with country team to contextualize	SLEEP UNDER A TREATED MOSQUITO NET A EVERYONE SHOULD SLEEP UNDER A TREATED MOSQUITO NET EVERY NIGHT B PREGNANT WOMEN SHOULD GO FOR SEVERAL ANTENATAL VISITS C PREGNANT WOMEN SHOULD TAKE MEDICINE TO PREVENT THEM FROM GETTING MALARIA D ANYONE WITH FEVER SHOULD GO TO A HEALTH FACILITY FOR TESTING AND TREATMENT E CHILDREN WITH FEVER SHOULD BE TAKEN TO THE HEALTH FACILITY WITHOUT DELAY F RAPID DIAGNOSTIC TEST HELPS TO KNOW IF A FEVER IS CAUSED BY MALARIA G FREE ACT TREATMENT H ENSURE CHILDREN RECEIVE THE MEDICATION THAT PREVENTS MALARIA DURING THE RAINY SEASON I GO TO A HEALTH FACILITY IF YOU MISS A COMMUNITY HEALTH AGENT'S HOME VISIT TO GET THE MEDICATION THAT PREVENTS MALARIA IN CHILDREN DURING THE RAINY SEASON J ENSURE CHILD RECEIVES MEDICATION THAT PREVENTS MALARIA FOR TWO DAYS AFTER THE FIRST DOSE K		

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		THE MEDICATION GIVEN TO CHILDREN DURING THE RAINY SEASON HELPS PREVENT MALARIA L SLEEP UNDER A NET EVERY NIGHT TO AVOID MOSQUITO BITES M HOW TO INSTALL BED NETS N HOW TO WASH A BED NET O HOW TO SLEEP UNDER A BED NET P WHERE TO GET FREE BED NETS Q CHILDREN LESS THAN 5 YRS SHOULD SLEEP UNDER A BED NET TO AVOID MOSQUITO BITES R CLEAN UP SURROUNDINGS S OTHER _____ X (SPECIFY) DON'T KNOW/CAN'T REMEMBER Z	
1111A	Can you complete the following phrase? "[Insert first few words of country-specific malaria SBC tagline]" ZERO MALARIA STARTS WITH ME AND YOU MALARIA 360, EVERYTHING MALARIA GOOD LIFE, ITS AN EVERYDAY THING **Review tagline with country team to contextualize	CORRECTLY COMPLETED "[insert correct phrase]" 1 INCORRECTLY COMPLETED 2 DON'T KNOW 9	Q1112A Q1112A
1111B	Where did you see or hear this phrase?  <b>MULTIPLE RESPONSES POSSIBLE</b>  <b>PROMPT:</b> Anywhere else?  **Review response options with country team to contextualize	GOVERNMENT CLINIC/HOSPITAL A COMMUNITY HEALTH AGENT B HEALTH WORKER.....C FRIENDS/FAMILY D WORKPLACE E COMMUNITY EVENT/DRAMA GROUPS E COMMUNITY VOLUNTEER/CBA.....G PEER EDUCATORS H POSTERS/LEAFLETS/.....I BILLBOARDS J TELEVISION K RADIO L NEWSPAPER/MAGAZINE M MOSQUE/CHURCH N COMMUNITY LEADERS O SOCIAL MEDIA P OTHER X (SPECIFY) DON'T KNOW Z	
1112A	Can you complete the following phrase? "[Insert first few words of country-specific malaria SBC tagline]" ZERO MALARIA STARTS GOOD LIFE MALARIA 360 **Review tagline with country team to contextualize	CORRECTLY COMPLETED 1 INCORRECTLY COMPLETED 2 DON'T KNOW 9	Q1113 Q1113
1112B	Where did you see or hear this phrase?  <b>MULTIPLE RESPONSES POSSIBLE</b>  <b>PROMPT:</b> Anywhere else?	GOVERNMENT CLINIC/HOSPITAL A COMMUNITY HEALTH AGENT B HEALTH WORKER.....C FRIENDS/FAMILY D WORKPLACE E COMMUNITY EVENT/DRAMA GROUPS F COMMUNITY VOLUNTEER/CBA.....G PEER EDUCATORS H	

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	**Review response options with country team to contextualize	POSTERS/LEAFLETS.....I BILLBOARDS.....J TELEVISION.....K RADIO.....L NEWSPAPER/MAGAZINE.....M MOSQUE/CHURCH.....N COMMUNITY LEADERS.....O SOCIAL MEDIA.....P OTHER.....X (SPECIFY) DON'T KNOW.....Z	
1113.	Which of these logos /pictures do you recognize?  <b>INTERVIEWER SHOWS 3 IMAGES INCLUDING THE LOGO THAT WAS USED IN THE MOST RECENT COMMUNICATION CAMPAIGN; THE TWO OTHERS THAT ARE MADE UP</b>	CAMPAIGN LOGO ONLY.....1 CAMPAIGN LOGO AND ANOTHER.....2 OTHER LOGOS ONLY.....3 DID NOT RECOGNIZE ANY LOGOS.....4	Q1201 Q1201 Q1201
1114.	Where did you see the logos/pictures?  <b>MULTIPLE RESPONSES POSSIBLE</b>  <b>PROMPT:</b> Anywhere else?  **Review response options with country team to contextualize	GOVERNMENT CLINIC/HOSPITAL.....A COMMUNITY HEALTH AGENT.....B FRIENDS/FAMILY.....C WORKPLACE.....D COMMUNITY EVENT/DRAMA GROUPS.....E PEER EDUCATORS.....F POSTERS/LEAFLETS.....G BILLBOARDS.....H TELEVISION.....I NEWSPAPER/MAGAZINE.....J MOSQUE/CHURCH.....K COMMUNITY LEADERS.....L SOCIAL MEDIA.....M OTHER.....X (SPECIFY) DON'T KNOW.....Z	

**RECALL OF MALARIA MESSAGES - SMC**

1115	<u>Before the distribution</u> of the medication to prevent malaria in children under five came to your community, did you hear or see anything about the program?	YES.....1 NO.....2 DON'T KNOW.....9	
1116	From which sources did you hear or see messages about the campaign?	HEALTH FACILITY.....A COMMUNITY HEALTH WORKER.....B FRIENDS/FAMILY.....C WORKPLACE.....D COMMUNITY EVENT/DRAMA GROUPS.....E TOWN CRIER.....F POSTERS/BILLBOARDS.....G TELEVISION.....H RADIO.....I NEWSPAPER.....J MOSQUE/CHURCH.....K COMMUNITY LEADERS.....L SOCIAL MEDIA.....M SMS/CHAT/EMAIL.....N INTERNET.....O OTHER.....X (SPECIFY)	

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		DON'T KNOW ..... Z	
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## SECTION XII: INDOOR RESIDUAL SPRAYING (IRS)

### Awareness

IRS: ACCESS AND USE			
NO.	QUESTION	CODING CATEGORIES	SKIP TO
1201.	Are you aware of programs that spray the walls inside of a house to kill the mosquitoes that cause malaria?	YES 1 NO 2	Q1203
1202.	If this program came to your community, would you be willing to allow them to spray the inside walls of your house?	YES 1 NO 2 DON'T KNOW 9	Q1204
1203.	If the program that sprays walls inside the house with insecticide to protect households from malaria came to your community, would you be willing to allow them to spray the inside walls of your house?	YES 1 NO 2 DON'T KNOW 9	END

### Attitudes

IRS: ATTITUDES				
I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with it. <i>Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.</i>				
NO.	QUESTION	AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
1204.	Many people develop skin problems (rashes, itching) after the walls inside their houses are sprayed with insecticide.	1	2	9
1205.	After spraying the interior walls of a household with insecticide, a person can touch the walls safely once the spray has dried	1	2	9
1206.	People have problems with bugs/bed bugs after the walls are sprayed.	1	2	9

1207.	The benefits of having my house sprayed is worth the effort needed to move my belongings out so it can be sprayed	1	2	9
1208.	It bothers me to leave my possessions outside of my house while my walls are being sprayed.	1	2	9
1209.	Spraying the inside walls of a house to kill mosquitoes does not cause any health problems for the people living in the house	1	2	9
1209b.	I am concerned that the walls of my house will be damaged because of the spray	1	2	9
1210.	There is no need to sleep under a mosquito net once your house has been sprayed	1	2	9

### Perceived response efficacy

IRS: PERCEIVED RESPONSE EFFICACY	
I am going to read a series of statements or questions to you and I would like you to tell me if you agree or disagree with the statement.	

**SURVEY ON THE DETERMINANTS OF MALARIA BEHAVIORS  
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<i>Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use if respondent is not able to provide another answer.</i>				
NO.	QUESTION	AGREE	DISAGREE	DON'T KNOW/ UNCERTAIN
1211	Spraying the inside walls of a house is an effective way to prevent malaria	1	2	9
1212	People who live in houses that have been sprayed are less likely to get malaria	1	2	9

**Perceived self-efficacy**

IRS: PERCEIVED SELF-EFFICACY				
I am going to ask you about a series of actions you could take, and I would like you to tell me if you think you could or could not do each action successfully. <i>Interviewer: do not read 'DONT KNOW/UNCERTAIN' response and only use it if the respondent is not able to provide another answer.</i>				
NO.	QUESTION	COULD	COULD NOT	DON'T KNOW/ UNCERTAIN
1213	Move all my furniture out of my house to prepare the house for spraying	1	2	9
1214	Sleep in my house on the night it is sprayed	1	2	9

RECORD THE TIME	HOURS	_ _ _
	MINUTES	_ _ _

**Thank respondent for her time and patience**